

CALUMET HOMESTEAD REHAB CENTER
1712 MONROE ST

NEW HOLSTEIN 53061 Phone:(920) 898-4296
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 101
Total Licensed Bed Capacity (12/31/04): 101
Number of Residents on 12/31/04: 83

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 87

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		31.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		45.8
Supp. Home Care-Household Services	No	Developmental Disabilities	1.2	Under 65	4.8	More Than 4 Years		22.9
Day Services	No	Mental Illness (Org./Psy)	33.7	65 - 74	7.2			-----
Respite Care	Yes	Mental Illness (Other)	1.2	75 - 84	31.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	6.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.4		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	18.1	65 & Over	95.2	-----		
Transportation	No	Cerebrovascular	19.3		-----	RNs		9.1
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		8.2
Other Services	Yes	Respiratory	1.2	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	16.9	Male	26.5	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	73.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	7	100.0	319	54	88.5	117	1	100.0	133	14	100.0	151	0	0.0	0	0	0.0	0	76	91.6
Intermediate	---	---	---	7	11.5	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	8.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		61	100.0		1	100.0		14	100.0		0	0.0		0	0.0		83	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	6.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	8.0	Bathing	0.0	91.6	8.4	83
Other Nursing Homes	2.3	Dressing	7.2	85.5	7.2	83
Acute Care Hospitals	79.5	Transferring	24.1	68.7	7.2	83
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	15.7	77.1	7.2	83
Rehabilitation Hospitals	0.0	Eating	22.9	68.7	8.4	83
Other Locations	3.4	*****				
Total Number of Admissions	88	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	1.2	Receiving Respiratory Care		10.8
Private Home/No Home Health	18.9	Occ/Freq. Incontinent of Bladder	60.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	21.1	Occ/Freq. Incontinent of Bowel	27.7	Receiving Suctioning		0.0
Other Nursing Homes	2.1			Receiving Ostomy Care		1.2
Acute Care Hospitals	14.7	Mobility		Receiving Tube Feeding		1.2
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		25.3
Rehabilitation Hospitals	0.0					
Other Locations	4.2	Skin Care		Other Resident Characteristics		
Deaths	38.9	With Pressure Sores	2.4	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	2.4	Medications		
(Including Deaths)	95			Receiving Psychoactive Drugs		55.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 100-199 Peer %	Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	86.1	93.1	0.93	90.2	0.95	90.5	0.95	88.8	0.97
Current Residents from In-County	67.5	86.2	0.78	82.9	0.81	82.4	0.82	77.4	0.87
Admissions from In-County, Still Residing	21.6	33.0	0.65	19.7	1.09	20.0	1.08	19.4	1.11
Admissions/Average Daily Census	101.1	79.1	1.28	169.5	0.60	156.2	0.65	146.5	0.69
Discharges/Average Daily Census	109.2	78.7	1.39	170.5	0.64	158.4	0.69	148.0	0.74
Discharges To Private Residence/Average Daily Census	43.7	29.9	1.46	77.4	0.56	72.4	0.60	66.9	0.65
Residents Receiving Skilled Care	91.6	89.7	1.02	95.4	0.96	94.7	0.97	89.9	1.02
Residents Aged 65 and Older	95.2	84.0	1.13	91.4	1.04	91.8	1.04	87.9	1.08
Title 19 (Medicaid) Funded Residents	73.5	73.3	1.00	62.5	1.18	62.7	1.17	66.1	1.11
Private Pay Funded Residents	16.9	18.3	0.92	21.7	0.78	23.3	0.73	20.6	0.82
Developmentally Disabled Residents	1.2	2.7	0.45	0.9	1.28	1.1	1.07	6.0	0.20
Mentally Ill Residents	34.9	53.0	0.66	36.8	0.95	37.3	0.94	33.6	1.04
General Medical Service Residents	16.9	18.6	0.91	19.6	0.86	20.4	0.83	21.1	0.80
Impaired ADL (Mean)	47.2	47.5	1.00	48.8	0.97	48.8	0.97	49.4	0.96
Psychological Problems	55.4	69.4	0.80	57.5	0.96	59.4	0.93	57.7	0.96
Nursing Care Required (Mean)	5.4	7.4	0.74	6.7	0.81	6.9	0.79	7.4	0.73